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TO Office of Initial Patent Examination **FAX** 571-273-8300
FROM Nicole S. January, Paralegal *NSJ* **PAGES** 3 **(INCLUDING THIS SHEET)**
PHONE 571-272-4000 **DATE** 3/24/2006
RE Filing Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address
OUR FILE 3052/117

COMMENTS

Dear Sir/Madam:

Please immediately process the attached Transmittal of Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address.

Please note that the attached correspondence was filed on September 21, 2005 with the United States Patent and Trademark Office.

PLEASE NOTIFY BROMBERG & SUNSTEIN LLP AT (617) 443-9292, IF THERE ARE ANY PROBLEMS WITH THIS TRANSMISSION.

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03052/00117 479596.1

PTO/SB/87 (09-04)

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RE: US Patent Application #10/047,191

on September 21, 2005

Date

1. Revocation of Power of Attorney with
New Power of Attorney and Change of
Correspondence Address (1 page)



Signature

Dorothea Dantouze

Typed or printed name of person signing Certificate

N/A

(817) 338-0004

Registration Number, if applicable

Telephone Number

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/047,191
	Filing Date	11/7/2001
	First Named Inventor	DANIEL HENDERSON
	Art Unit	2645
	Examiner Name	
	Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number: 02101 Please change the correspondence address for the above-identified application to: The address associated with
Customer Number: 02101

OR

<input checked="" type="checkbox"/> Firm or Individual Name	BROMBERG & SUNSTEIN				
Address	125 SUMMER STREET				
City	BOSTON	State	MA	Zip	02110-1618
Country	USA				
Telephone	(617) 443-9292	Email			

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	DANIEL HENDERSON		
Date	SEPTEMBER 21, 2005	Telephone	(817) 338-0004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

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